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AUG	2 0 2007	le fee(s), to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885				
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				Joanna C. Smith			(Depositor's name)
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APPLICATION NO.	FILING.DATE		FIRST NAMED INVENT	OK	ATTORNEY DOCKET NO.		
10/644,545			ri-35080 .	6572			
TITLE OF INVENTION: QAM SIGNALING	com-complexiii v	HIERARCHICAL DE	CODING FOR COMMI	UNICATIONS SYSTE	ims usti	ng multidimens	IONAL
APPENCTYPE	SMALL ENTITY)SSUE FEE DUE	PUBLICATION FEE DI	E PREV. PAID (SSUE	FEB 1	TOTAL FEE(S) DUE	DATE DUÉ
nonprovisional	NO	\$1400	\$300	\$0	······································	\$1700	10/19/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS				
CORRIELUS, JEAN B		2611	375-340000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address' indication (or "Fee Address" Indication form			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If so name is 3 Frederick J. Telecky.				
PTO/SB/47; Rev 03-92 or more recent) susched. Use of a Customer Number is required.			2 registered patent attempts or agents. If no name is is issed, no name will be printed.				
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PLEASE NOTE: Unless recordation as set forth in	an assignee is identi 137 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on the	patent. If an assigno	e is ident	iffed below, the docu	ment has been filed for
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Please check the appropriate	assignor category or	catogories (will the be as	Dallas, TX	75265			
4a. The following fee(s) are				,		***************************************	***************************************
2 Issue Fee			Payment of Fee(s): (Pl	esse first reapply any	previou	sly paid issue fee sho	(svoda uw
Publication Fee (No s	ard, Form PTO-2038	is:attache	đ				
Advance Order - # 01	K. The Director is here	by authorized to charge posit Account Number	the mare	fond foods) and district	ency, or credit any		
5. Change in Entity Status	(from status indicated	above)				************************	******************************
Os. Applicant claims St	WALL ENTITY status	See 37 CFR 1,27.	Db: Applicant is no lo	nger claiming SMALL	ENTITY	status. Sec 37 CFR	1.27(g)(2)
NOTE. The Issue Fee and Printeress as shown by the reco	rds of the United State	s Patent and Trademark	Office,	the applicant, a regist	ered attor	ney or agent; or the as	ssigned or other party in
Authorized Signature	/Steven A.	Shaw/		Date <u>08/2(</u>			
Typed or primed name Steven A. Shaw			Registration No. 39, 368				
This collection of information	n is required by 37 Ci	R 1 311. The information	is required to obtain or	relain a benefit by the	miblion	hich is to file found to	di Tigoro
This collection of information an application. Confidentiali submitting the completed applies form and/or suggestions	y is governed by 35 t plication form to the t for reducing this burd	J.S.C. 122 and 37 CFR I USPTO, Time will vary on, should be sent to the	.14. This collection is a depending upon the ind	stimated to take 12 mi	nutes to c ments on	use amount of time y	thering, preparing, and ou require to complete

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